

## Maine Public Preschool Program Application 2016-17

### Maine Public Preschool Program Application 2016-2017

Thank you for your interest in establishing a public preschool for 2016-17. The online portion of this application should take approximately 20 minutes. Before you begin, gather the following documents for reference and completion of the application process. Please see <http://www.maine.gov/doe/publicpreschool/establishing/index.html> for a link to an MS Word copy if you would like to preview the entire application before entering into Survey Monkey.

[Chapter 124: Basic Approval Standards: Public Preschool Programs](#)

[Public Preschool Program Budget Worksheet](#)

[Child Development Services Memorandum of Understanding](#)

Memorandums of Understanding with other partners (Head Start, etc.) if applicable

To complete this survey, enter responses and press the "next" button. To go back, press the "prev" button. Review your responses carefully before you hit the final "Submit" button.

When you have completed the online portion, email your budget to [susan.d.reed@maine.gov](mailto:susan.d.reed@maine.gov). Send paper copies of the signature page of the application, Memorandum of Understanding with CDS and Head Start letter of support (if not partnering), and partner MOU(s) [if applicable] to Sue Reed at the Maine Department of Education, SHS 23, Augusta, ME 04333.

**DEADLINE FOR APPLICATIONS: July 15, 2016** **No applications will be accepted after this deadline.**

If you have any questions or technical difficulties, contact Sue Reed at [susan.d.reed@maine.gov](mailto:susan.d.reed@maine.gov) or 624-6632.

## Maine Public Preschool Program Application 2016-17

### School Administrative Unit Information

1. Indicate whether classroom(s) are new or expansion.

☐

New

☐

Expansion

## Maine Public Preschool Program Application 2016-17

### Superintendent Information

**2. Superintendent Information**

Name

Address

City

Zip Code

Phone

Email

SAU/District

County (or Counties)

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**Program Contact, Location, Numbers & NEO Information**

**3. Program Contact Information**

Name

Title

Address

City

Zip Code

Phone

Email

4. Provide the location of preschool classroom(s).

Name of School or Agency	
Administrator/ Principal	
Address	
City	
Zip Code	
SAU #	
County	
Phone	
Email	

5. Provide location of preschool program classroom(s). (Complete only if you have multiple locations.)

Name of School or Agency	
Administrator/ Principal	
Address	
City	
Zip Code	
Phone	
SAU #	
County	
Email	

6. Provide the number of children in each classroom (for up to 5 classrooms). If you have fewer than 5 classrooms, leave the remaining lines blank.

Classroom 1	
Classroom 2	
Classroom 3	
Classroom 4	
Classroom 5	

7. Provide the name of the school(s) counting children in NEO.

Principal's Name

School Name

Principal's Name

School Name

Principal's Name

School Name

## Maine Public Preschool Program Application 2016-17

### Information about Early Childhood Providers in your Community & Instructions

8. What type of early childhood provider(s) are operating in your SAU? Use the following link to obtain a list of all licensed preschool and child care programs:

<http://www.childcarechoices.me/SearchForChildcare.aspx>

(Select all that apply)

☐ Family Child Care

☐ Child Care Center

☐ Head Start

☐ Private Preschool

☐ Other (please specify)

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Same as 4

9. Indicate the date(s) and location(s) of the meeting(s) with family child care, child care center, Head Start and/or private preschool programs in your community in which you discussed how the public preschool will align with community needs.

Date(s)

Location(s)

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### Community Partner Information

**If you will have formal relationships with community partners please complete the information below. If you do not have community partners you may skip this question.**

#### 10. Partner information

Name of Agency/Program

Director

Address

City

Zip Code

Email

Phone Number

License Number

Quality Rating &  
Improvement System  
(QRIS) Certificate #

Type (family child care,  
child care center, Head  
Start, preschool)

11. Partner information (complete only if you have multiple partners).

Name of Agency/Program	<input type="text"/>
Director	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
Zip Code	<input type="text"/>
Email	<input type="text"/>
Phone Number	<input type="text"/>
License Number	<input type="text"/>
QRIS Certificate #	<input type="text"/>
Type (family child care, child care center, Head Start, preschool)	<input type="text"/>

12. Provide information about your partners. (Complete only if you have multiple partners)

Name of Agency/Program	<input type="text"/>
Director	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
Zip Code	<input type="text"/>
Email	<input type="text"/>
Phone Number	<input type="text"/>
License Number	<input type="text"/>
QRIS Level 4 (included certificate on last page of application)	<input type="text"/>
Type (family child care, child care center, Head Start, preschool)	<input type="text"/>

13. Indicate the annual start and end dates of the preschool program.

Start Date      MM      DD      YYYY  
                     /  /

End Date         /  /

14. Indicate the number of instructional days annually for each preschool session:

Number of days?     

## Maine Public Preschool Program Application 2016-17

### Preschool Schedule

15. Indicate the numbers of days per week the preschool is open.

- ☐ 5 days/week  
☐ 4 days/week  
☐ 3 days/week  
☐ 2 days/week

16. Indicate the number of hours per day the preschool is open.

If the hours/day are variable, provide the information by day (e.g., M- 4 h 30m; Tu -F - 5 h). If the schedule is variable describe how it will change throughout the year.

17. Indicate the total number of hours per week the preschool program is open.

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18. Indicate the Child Development Services (CDS) Regional site for your preschool program?

Name/Director

Address

City

Zip Code

Email

Phone

19. Indicate the preschool screening tool(s) you will use (check all that apply).

☐ Brigance

☐ DECA

☐ DIAL

☐ Health

☐ Vision

☐ Hearing

Other (please specify)

20. Indicate the date(s) & location(s) for screening.

Date 1

Location 1

Date 2

Location 2

Date 3

Location 3



21. Indicate who will conduct screening(s). (Check all that apply.)

- ☐ CDS
- ☐ School district
- ☐ Head Start
- ☐ Public school staff or personnel
- ☐ Nurse

Other (please specify)

22. Explain how screening information will be used (e.g., to determine placement, to refer for additional assessment, etc.).

23. Describe how formative and summative research-based assessment of children's learning and development will occur and how assessments align with Maine ELDS. (Include the types of assessments, who will administer the assessment, and how the data will be used.) Refer to Chapter 124, Section 4.03 B. Assessment 1-7.

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### Staff and Enrollment

24. List the number of 081 certified teachers in the program.

25. List the number of Education Technicians II, Education Technician III and staff with special education certifications in the program.

26. List the total number of children served by the program.

27. Provide student-staff ratios for each classroom. (If there is variation among classrooms, provide details about variation across classrooms.)

Recruitment and Eligibility

28. Describe your recruitment strategy for preschool students. Include information about how you are recruiting children with disabilities, those who have previously not had access to preschool, and children who have other risk factors (such as children living in extreme poverty).

29. Provide the name of your school's McKinney-Vento liaison.

30. Describe your process for prioritizing, identifying and enrolling McKinney-Vento eligible children.

31. Describe your eligibility criteria for enrollment.

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**Enrollment and Intake Procedures**

32. Describe your enrollment and intake procedures.

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**Transition into Public Preschool Program**

33. Describe the procedures and supports for children transitioning into public preschool.

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**Transition from Public Preschool to Kindergarten**

34. Describe the procedures and supports for transitioning children from preschool to kindergarten.

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**Curriculum**

35. Indicate the evidence-based curriculum/curricula used in the program and describe how it is aligned with Maine's Early Learning Development Standards.

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**Meals and Snacks**

36. Describe the plan to ensure well-balanced meals and/or snack that follow the US Department of Agriculture guidelines? (Refer to Chapter 124, Section 8.02 Specific Requirements)

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**Family Engagement**

37. Describe the policies, procedures and activities the program will use to support family engagement (e.g. newsletters home, number of family events, number of family meetings, number of parent/teacher conferences, materials in home languages for DLL students, two-way communication, etc.)

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### Community-based Resources

38. Describe the process the program will use to establish relationships with community-based learning resources (e.g. partnerships with local libraries, dentists to conduct oral screenings, relationships with medical providers to assure children have access to medical homes, etc.) (Chapter 124, Section 11)

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### Student Records

39. If operating in a contract with another agency, describe the procedures for maintaining student records and confidentiality. (Chapter 124, Section 15.01)

40. If operating in a contract with another agency, describe procedures for sharing student data and records. (Chapter 124, Section 15.01)

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### Transportation

41. Indicate whether the SAU will provide transportation.

☐ Yes

☐ No

42. If yes, describe the transportation schedule and procedures.



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### Professional Development

43. Describe the process for ensuring high quality professional development opportunities for all staff including how the professional development will be linked to preschool children's learning and development needs.

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### Performance Evaluation and Professional Growth

44. Indicate your school's Professional Practice Model.

- ☐ NBPTS Five Core Propositions and Indicators
- ☐ The Framework for Teaching by Charlotte Danielson
- ☐ The Marzano Art and Science of Teaching Framework
- ☐ Marshall Teacher Evaluation Rubric
- ☐ MSAD 49-Marshall Teacher Evaluation Rubric

Other (please specify)

45. Describe how will your school's Professional Practice Model will be used in the preschool setting.

46. Describe your approach to supporting ongoing improvement in preschool instruction.

47. Describe the supervision procedures for your education technicians and related staff. If staff is employed by a partner agency, describe how supervision will be coordinated.

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### Inclusion

48. Describe the program's inclusion practices and access to regular education instruction.

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### Evaluation of your preschool program

49. Please describe your program's plan for evaluating the preschool program.

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### Assurances

Federal and state laws require publicly funded preschools to meet specific standards. Applicants must provide assurances of complying with these regulations.

50. I assure that the preschool will comply with the following sections of Chapter 124 of the Maine Revised Statutes.

	Yes
Class Size Maximum 16 (Section 3)	<input type="radio"/>
Child:Staff Ratio of 1:8 is maintained at all times (Section 6)	<input type="radio"/>
Curriculum & Comprehensive Assessment (Section 4)	<input type="radio"/>
Quality of Education Personnel (Section 1)	<input type="radio"/>
Nutrition (Section 8)	<input type="radio"/>
Coordination with Community Programs (Section 12)	<input type="radio"/>
Transition (Section 13)	<input type="radio"/>
Transportation (Section 14)	<input type="radio"/>
Record and Reports (Section 15)	<input type="radio"/>
Public Preschool Approval Processes (Section 16)	<input type="radio"/>
Program Monitoring (Section 17)	<input type="radio"/>

51. I assure that the curriculum meets the following requirements:

Yes

The preschool curriculum offers activities in block building, dramatic play, writing, art, music science, math, literacy, sand/water play, manipulatives, and gross motor activities each session.

☐

The daily scheduled is posted and include opportunities for individual, small group and whole group activities. Whole group time is limited to 10-20 minutes.

☐

Opportunities for physical movement, fresh air and access to drinking water are provided to the children.

☐

Opportunity for rest in a full-day program (more than 5 hours) is provided for the children. Cots or mats are provided for each child.

☐

Transitions are minimized, including school "specials" especially during the first half of the school year. Most special supports or therapies are provided in-class to minimize transitions for children with disabilities.

☐

Program development and service to any and all English learners are overseen by and English as a Second Language-endorsed teachers.

☐

52. I assure that the indoor preschool setting meets the following requirements:

Yes

Indoor space available is a minimum of 35 square feet per child. (Hallways, lockers, cubbies, door swings, closets, supply cabinets, corridors, bathrooms, teacher spaces, food preparation areas and offices are not to be included as indoor space available per child.)

☐

All classroom spaces are accessible to all children, including children with disabilities.

☐

Water source is available in the classroom for hand washing, and drinking water readily available to children throughout the day.

☐

The indoor environment is designed so staff can supervise children by sight and sound at all times. Supervision for short intervals by sound is permissible, as long as teachers check frequently on children who are out of sight (e.g., independent toileting).

☐

Toilets, accessible for use by all participating children, are within 40 feet of the indoor areas that children use.

☐

Electrical outlets in public preschool classrooms are protected by safety caps, plugs or other means.

☐

Natural light is present in any classroom used for four-year-old program activities.

☐

Easily accessible and individual space is available for children's outside clothing and personal possessions.

☐

53. I assure that the preschool outdoor setting meets the following requirements:

Yes

The program has access to an outdoor play area with at least 75 square feet of usable space per child and with equipment of a size suitable to the age and needs of four-year-old children as dictated by the National Safety Standards for playgrounds in public schools.

☐

The outdoor play area is protected by fences or natural barriers.

☐

Surfaces used under climbers, swings and at the bottom of slides are energy-absorbing materials such as mulch, sand or bark. Concrete or asphalt are not be used.

☐

Outdoor play areas provide both shade and sun.

☐

There are established protocols for emergencies.

☐

The playground areas and equipment are accessible to all children.

☐

Preschool classrooms schedule outdoor time by themselves, with other preschool classrooms, or with kindergarten children.

☐

54. I assure that the preschool meets the following requirements regarding seclusion and physical restraint (Chapter 33 tx. See: <http://www.maine.gov/doe/school-safety/restraints/index.html>):

Yes

The program understands and follows the reporting requirements regarding use of seclusion and restraint.

☐

The program understands and follows the requirements regarding appropriate number of staff being trained by a qualified program regarding seclusion and restraint.

☐

The program is aware of resources regarding behavior management and how to avoid issues associated with seclusion and restraint.

☐

## Maine Public Preschool Program Application 2016-17

### Final Steps

Print out this page and include the following:

- ☐ Assurance that budget has been mailed to Sue Reed at [susan.d.reed@maine.gov](mailto:susan.d.reed@maine.gov)
- ☐ Copy of signed MOU with Child Development Services (CDS)
- ☐ Copy of signed letter of support from Head Start/child care providers/preschool programs if *not* in partnership
- ☐ Copy of MOU(s) with Head Start and/or local child care/preschool providers(s) if in partnership

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Superintendent Signature

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Name

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Date

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Principal Signature

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Name

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Date

Mail the signed document to:  
Sue Reed  
Maine Department of Education  
State House Station 23  
Augusta, ME 04333